FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

14 JUL 11 PM 3: 17

	For An Authorized Committee					Office Use Only		
1. NAME OF COMMITTEE (in fu	TYPE OR P	RINT ▼		ample: If typir or the lines.	ng, type	12FE4M5		
Elizabeth Dole Committee, Inc.								
ADDRESS (number and street)								
Check if diffe	ent LILL							
than previously reported. (ACC	/ Daloid)	1 1 1 1	1 1		NC	27624	
2. FEC IDENTIFICAT	TION NUMBER ▼		CITY A			STATE A	ZIP CODE ▲ STATE ▼ DISTRICT	
C 00369140			THIS EPORT	NEV (N)	OR	AMEN (A)		
July 15 Qu October 15 January 3) El	ection on	Primary (12 Convention T-Election Re General (30	P) [(12C) [port for the:	General Special Runoff (in the State of	
5. Covering Period 04 01 2014 through 06 30 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Brent D. Barringer								
Type or Print Name of Treasurer Brent D. Barringer								
Signature of Treasurer Date Date Date								
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.								
Office Use Only							FEC FORM 3 (Revised 02/2003)	